

Discussion of Notification to COA of Late Documents

August 2014

Overview

This item discusses possible COA reporting points when institutions are not complying with the timelines of the Accreditation Cycle.

Staff Recommendation

Identify points at which staff should provide reports to the COA regarding institutions that are out of compliance with accreditation requirements.

Background

Over the course of the past several meetings, the COA has expressed an interest in being informed regarding institutions that appear to be struggling to meet accreditation requirements in a timely manner. The CTC Accreditation cycle requires participation from institutions at multiple points and relies on a model of continuous improvement (see Accreditation Overview and Cohort Map in the Appendix).

In 2013-14, the Commission took action to recover costs associated with late documents (Title V Regulations §80692), however, there are also issues related to late documents and the ability of an institution to fully participate in accreditation activities. The cycle is designed to provide information to the program, the unit, and to guide the work of the site visit team. When documents are significantly late that is not possible and makes the already challenging work of those involved in determining critical issues of standards alignment and quality extremely difficult.

Program Assessment documents that are not preliminarily aligned within six months of the site visit may require a full site review. This occurred during a number of visits in 2013-14. In two cases, the site visit team recommended probationary stipulations based partly on the fact that Program Assessment had not been completed and there was not sufficient evidence that the program(s) was meeting the Commission's standards. This raises the question as to whether earlier intervention from the COA was warranted.

Currently the COA receives a Site Visit Report during Year Six of the Accreditation Cycle. COA may want to consider being informed of the status of institutions that are not complying with accreditation timelines prior to the Site Visit Report. If so, at what point(s) should this occur?

An illustration of a possible reporting table is provided on the following page. The update could be provided at each COA meeting by cohort. Once late documents are submitted, the date of submission is noted and reported at the next COA meeting and the institution is removed from future reporting tables. The COA could determine what, if any action should be taken for programs that are listed. In the event that an institution is significantly out of compliance with the accreditation cycle, the COA could decide that it would like a representative from that institution available at the meeting.

Sample Table of Institutions Submitting Late Documents

Cohort Site Visit	What Documents When Due	Institution/Programs Documents Not Submitted by Due Date	Date Submitted
Indigo 2014-15	Program Assessment Due December 15, 2012	CSUCC (Prelim Admin)	
		CSUNC (MS,SS,DHH)	6/1/14
		ICC (M/M,MS)	7/15/14
		UCS (all programs (12))	
	Biennial Report Due Fall 2013	UCS	
		CSUCC	
	Clear Admin Transition Plan July 1, 2014	CSUCC Mountain University	8/2/14
Blue 2015-16	Program Assessment Due December 15, 2013	Clark College (SLP, Nursing, CWA)	12/13/13
		Alturas Institute (SS)	4/6/14
		PRCOE (CTE, Clear Admin)	7/1/14
	Admin Transition Plans Due July 1, 2014	Alturas Institute	7/28/14
		Valley College	
Green 2016-17	Biennial Report Due Dec. 15, 2013	CCU	
		St. Cheryl's	
	Admin Transition Plans Due July 1, 2014	CSU AP	

Next Steps

Determine if and/or when the COA would like staff to report information regarding institutional compliance with accreditation timelines and requirements.

**Commission on
Teacher Credentialing**



**Data-Based Educator Preparation
Accreditation System**

The revised educator preparation accreditation system is designed to focus on the demonstrated competence of California's educators. The system features ongoing data collection and a 7-year cycle of activities, including at least one site visit. The Commission's Committee on Accreditation can determine at any point if program intervention or assistance is needed. Success of the accreditation system is measured by the continuing viability of programs that produce effective educators for California's students.

- **ACCOUNTABILITY:** Continuous data collection, periodic site visits and focused intervention ensure ongoing program accountability and educator competence.
- **QUALITY:** Consistent adherence to program quality standards and candidate performance maintains educator preparation program quality.
- **STANDARDS:** Educator preparation programs demonstrate how the state requirements and program standards are met. Standards are aligned with California's K-12 Student Academic Content Standards and designed to prepare effective educators for the state's diverse population.
- **ONGOING IMPROVEMENT:** Analysis of data based on candidate competence is applied to ongoing program improvement and accreditation decisions.
- **BIENNIAL REPORTS:** Educator preparation programs collect data on candidate competence and report the results electronically every other year of the cycle. Reports are reviewed by Commission staff and reported to the Committee on Accreditation.
- **PROGRAM ASSESSMENT:** The program sponsor reports on indicators of candidate competence such as performance on assessments and feedback from employers. The report also includes program updates and provides a data-based rationale for any program changes. Reports are reviewed by trained educators with expertise in the credential area, are summarized by staff, and then reported to the Committee on Accreditation.
- **SITE VISITS:** All data are provided to a trained team of evaluators. Team members provide expertise in credential areas. Site visits also include in-depth interviews of graduates, candidates, employers, and program faculty and administrators. Accreditation recommendations are made by the team for final action by the Committee on Accreditation.

Accreditation Activities by Cohort

(accreditation activity is due to CTC)

Each institution is assigned to a cohort. There are seven cohorts. Data collection is an annual accreditation activity. The chart below indicates the accreditation activities for each cohort that require a submission to CTC over the next 7 years. After the seventh year, the cycle begins again with the same activities.

Cohort	Red	Orange	Yellow	Green	Blue	Indigo	Violet
2013-2014	Biennial Report Year 1 (Nov. 2014)		Biennial Report Year 3 (Nov. 2014)		Program Assess (Dec. 2013)	Biennial Report Year 5 (Sept. 2014)	Site Visit (as arranged with CTC)
2014-2015		Biennial Report Year 3 (Nov. 2015)		Program Assess (Dec. 2014)	Biennial Report Year 5 (Sept. 2015)	Site Visit (as arranged with CTC)	7 th Year Follow-Up ¹
2015-2016	Biennial Report Year 3 (Nov. 2016)		Program Assess (Dec. 2015)	Biennial Report Year 5 (Sept. 2016)	Site Visit (as arranged with CTC)	7 th Year Follow-Up ¹	Biennial Report Year 1 (Nov. 2016)
2016-2017		Program Assess (Dec. 2016)	Biennial Report Year 5 (Sept. 2017)	Site Visit (as arranged with CTC)	7 th Year Follow-Up ¹	Biennial Report Year 1 (Nov. 2017)	
2017-2018	Program Assess (Dec. 2017)	Biennial Report Year 5 (Sept. 2018)	Site Visit (as arranged with CTC)	7 th Year Follow-Up ¹	Biennial Report Year 1 (Nov. 2018)		Biennial Report Year 3 (Nov. 2018)
2018-2019	Biennial Report Year 5 (Sept. 2019)	Site Visit (as arranged with CTC)	7 th Year Follow-Up ¹	Biennial Report Year 1 (Nov. 2019)		Biennial Report Year 3 (Nov. 2019)	Program Assess (Dec. 2018)
2019-2020	Site Visit (as arranged with CTC)	7 th Year Follow-Up ¹	Biennial Report Year 1 (Nov. 2020)		Biennial Report Year 3 (Nov. 2020)	Program Assess (Dec. 2019)	Biennial Report Year 5 (Sept. 2020)
2020-2021	7 th Year Follow-Up ¹	Biennial Report Year 1 (Nov. 2021)		Biennial Report Year 3 (Nov. 2021)	Program Assess (Dec. 2020)	Biennial Report Year 5 (Sept. 2021)	Site Visit (as arranged with CTC)

¹All institutions, even those with a COA decision of **Accreditation**, must address issues or concerns raised during the site visit process **if** the COA requires a 7th Year Report.

- Any institution that has **Stipulations** placed on it by the COA must address the stipulations during the year following the site visit. The report of the work to address stipulations must be presented to the COA within one year of the COA's action.
- The COA may provide additional time for an institution to finish addressing stipulations if adequate progress has been made.